2012 Plan Review Application

Pet Related Business



Desired Opening Date/_	/ Plan review applications must be s	submitted a minimum of 30 days prior to opening
Plan Review Fees: New Op	peration (Base Permit) \$201	201
☐ Multiple Permits \$201 (for	more than one permit at this location of the	same business owner)
	_	ly rate of \$201.00 after the first hour. You will receive a sued. Permit fees are separate from plan review fees.
Type of services to be provide	ed (check all that apply):	
☐ Mobile Pet Grooming - 453	1 \square Pet Daycare -4525 -1,500 adoptions – 4527 \square Animal Shelter C	O ☐ Pet Shop Standard - all other pets- 4523 ☐ Commercial Kennel - 4526 Category 2 < 1,500 adoptions- 4528
	Facility/ Business Information *Facility r	name and information
Name of Busines/Facility		
Address		-
City	State _	Zip code
Business phone	Business Fax	t
	Business Owner Information *	*Requestor
Requestor Name		
Business Name and Address (if	f different from facility name)	
Requestor phone number	Requestor email	
	Contact Person (if different from req	questory · Plan Check
Contact Person		
Contact phone	Contact email	
	* for office use only the	ese are the required fields to be completed in for data entry
	Payment Informati	ion
Payment Amount \$		
•	yable to SKCDPH) VISA MasterCard	
Credit Card Billing Info A	ddress	
Ci	ty State	Zip
Card Number	Card Expires	/ 3 Digit Code
Required Signature (as on Cro	edit card)	Date
Return completed forms and	plans with payment to:	
Public Health – Seattle & King	County, Environmental Health Services, 401	L – 5th Avenue, Suite 1100, Seattle, WA 98104
	Office Use Only	1
SR#	PE#	PR#
Date plans received	Date plans approved	l
Inspector assigned to		



Pet Related Business Plan Review Submittal Cover Sheet - *REQUIRED*

Please place this cover sheet on top of the plans or on the outside of a set of plans. All of the following information must be submitted in the following order. Incomplete plans will not be accepted until all required information is received. Only completed plans will be processed and reviewed. For questions please contact Leah Helms at leah.helms@kingcounty.gov or 206-263-8450.

Establishment Name:			Phone:			
					Zin	
3	treet		City		Zip	
Applicant/Cont	act Person for Pla	nns	Phone:			
Mailing Addres	s:					
	Street	City	State	Zip		
Fax:		_ Email:				

Page number in plans or specifications should be noted below.

Please Check if Item included	Item	Information Required	Location in Plans (page #)	Public Health Notes
	Plan Review Application	Application must be complete		
	Plan Review Fee	-New: \$201 (1 hour base) -Remodel: \$201 (1 hour base) -Resubmitted Plans: \$201.00/hr *Hourly rate of \$201 charged after the base time		
	Infection Control Plan	Template can be downloaded from www.kingcounty.gov/healthservices/health/ehs/petbusin esses.aspx		
	Floor Plan Can be hand drawn	Lay out of the interior of the facility. Include fencing, barriers, walls, locations of animal enclosures and entry/exit of the building. Include locations of restrooms, all plumbing fixtures including sinks and hose bibs, and isolation areas. All equipment should be clearly labeled on the site plan with its common name.		
	Site Plan Can be hand drawn	Show building in relation to streets, sidewalks and parking. Include any outdoor animal areas, drains and hose bibs.		
	Equipment Schedule	List the make and model of all equipment (kennels, dryers, primary animal enclosures). Include any custom built enclosures/ equipment or cut sheets if available.		
	Finish Schedule	List the finish of the floors, walls and ceilings in all areas.		

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This template is provided as guidance; you can fill out the template or submit the information in your own format. Attach a drawing of your site plan. If you are going to submit information in a format other than this template; make sure that all items listed in this guidance are included. If something does not apply to your business, mark it as NA.

Ge	neral Operational Information:		
Bus	siness Name:		
Но	urs of Operation:		_
Sev	wer type: Public Septi	c/Private	
Wa	ter supply: Public Well/	Private	
of o	este disposal plan (describe type odisposal):		
Che	eck all that apply.		
	Cats/kittens	Rabbits	
	Dogs/puppies	Rodents	
	Fish	Ferrets	
	Reptiles	Other	
	Amphibians	Other	
	Birds		
Des	pervision and Staffing: scribe animal care for hours wher mals and who will provide this ca		ho is responsible for care of the
	scribe animal care for hours wher mals when the facility is closed?	the facility is closed to the pub	ic. Who is responsible for care of

Describe staffing ratios for animals allowed to co-mingle in play groups. (a maximum ratio of 1 human:20 dogs is recommended to not be exceeded. Commonly observed ratios in the industry range from 1:10 and 1:15 humans: dogs)

Indoor Areas Finish Schedule. Indicate which type of material will be used in the following areas. If something does not apply to your business, mark it as NA. If you have more than what is listed on this sheet or you have something that is not covered please write it on a separate sheet of paper.

	Floors	Walls	Base/Cove	Fencing	Comments
Example: Community play area	Sealed rubber mats	Epoxy painted from floor seam to three feet high on the wall	Vinyl base cove with silicone sealant at base and seams	Metal posts with glass barriers	
Bathing / Grooming area					
Community play area/ Indoor runs					
Customer waiting / Front counter area					
Garbage/Dumpster					
Isolation/ Quarentine area					
Mop sink area					
Restrooms					
Dog Potty Box	Describe materi	als used	<u> </u>		
Describe type of indoor heat	ing and cooling				
Describe type of lighting					

Indoor dog potty boxes must be constructed of materials that are easily cleaned. They must be maintained so that they can be cleaned frequently. Permanent structures should ideally drain to a sewer connection. Semi-permanent structures must be emptied, sanitized and fresh substrate applied no less than once a week.

Describe ventilation in the facility, including ventilation of isolation and quarantine areas.

The following materials and substances are considered **water resistant**: painted or sealed wood, sealed concrete block, stainless steel, vinyl flooring, glass, treated or sealed paneling, fiberglass, tile, tile block and other materials as approved by the director.

Animal Enclosures. Indicate all that apply. If something does not apply to your business, write NA.

	Quantity	Type of material	Comment/Notes
Dog Kennels / Indoor			
Dog Kennels/ Outdoor			
Cat Condos			
Bird Enclosures			
Puppies enclosures			
Kittens enclosures			
Small Animal (pocket pet, reptile enclosures)			
Other:			
Other:			

Outdoor Areas Finish Schedule. Indicate which type of materials will be used in the following areas. If something does not apply to your business, write NA.

	Flooring / Material	Fences	Comments
Kennels			
Community play areas			
Dog Potty box			
Sheltered area			
Other:			

Outdoor surfaces commonly used are concrete, gravel, and wood chips; gravel and wood chips should be replaced at least twice a year or more frequently if needed. Natural lawn or turf may be used if well maintained with regular watering, mowing and repair and kept free of mud or bare dirt.

Outdoor potty boxes must be constructed of materials that are easily cleaned. They must be maintained so that they can be cleaned frequently. Permanent structures should drain to a sewer connection. Semi-permanent structures must be emptied, sanitized and fresh substrate applied no less than once a week.

No wastewater containing animal excrement or chemicals may drain into a storm drain.

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Plumbing Schedule. Indicate all plumbing connections applicable to the facility. If something does not apply to your business, write NA.

	Quantity	Comments
Chemical dispensers Example: Automatic disinfectant dispensers		
Floor drains		
Bathing tubs		
Plumbed water systems for aquarium		
Sink – Dishwashing		
Sink - Hand washing		
Sink – Mop		
Water Heater(s) (Indicate size & recovery rate)		
Outdoor drains to sewer		
Outdoor drains to stormwater		
Other:		

Equipment Schedule. Indicate all equipment used at the facility.

If something does not apply to your business, write NA.

in sometiming does not appr	Quantity	Manufacturer	Model #	Comment/Notes
Refrigerator(s)				
Freezer(s)				
Washer(s)				
Dryer(s)				
Dishwasher (s)				
Floor scrub machines				
Dog drying machines Cage and kennel dryers				
Grooming Tables				
Other				